# ORGANIZATIONAL PROCEDURE



| PROCEDURE # 5.1C |                          | EFFECTIVE DATE       | REVISED DATE |
|------------------|--------------------------|----------------------|--------------|
| TITLE:           | SELF DIRECTION PROCEDURE | 1/1/2014             | 5/19/2022    |
| ATTACHMENT TO    |                          | REVIEW DATES         |              |
| POLICY #:        | 5.1                      | 8/21/2014, 5/19/2022 |              |
| POLICY TITLE:    | SELF DIRECTION           |                      |              |
| CHAPTER:         | UTILIZATION MANAGEMENT   |                      |              |

#### I. PURPOSE

To establish the standards that define, guide and detail how LRE and its provider network comply with the federal laws and Michigan Department of Health and Human Services (MDHHS) Contract requirements pertaining to the practice of self-direction.

#### II. PROCEDURE

It shall be the policy of Lakeshore Regional Entity (LRE) to ensure that all individuals with intellectual/developmental disabilities and/or mental illness have the opportunity to voluntarily participate in the self-direction process and to promote greater accessibility and availability of such arrangements for individuals receiving services.

- A. Self Direction will be based on the following principles and practices:
  - 1. Individuals will be provided with information regarding the principles and practices of Self Direction. Individuals will be encouraged to pursue more control and responsibility over their lives using principles and practices of Self Direction.
  - 2. Training, educational materials and peer examples of Self Direction will be shared with all individuals.
  - 3. Individuals shall be offered the tools and mechanisms supportive of self-direction. Self-direction shall be effective when the Community Mental Health Service Program(CMHSP) and the customer reach an agreement on a plan of services/supports, the amount of mental health and other public resources needed to accomplish the plan, and the arrangements through which resource use will be controlled and accounted for.
  - 4. Service planning and delivery processes must be designed to encourage and support customers to decide and control their own lives. Easily accessed methods must be offered and supported for customers to control and direct an individual budget including methods to authorize and direct the delivery of services and supports from qualified providers selected by the customer.
  - 5. Customers shall direct the use of resources to choose meaningful services and supports in accordance with their plan as developed through a person-centered process.

- 6. Fiscal responsibility and the wise use of public funds shall guide the customer and the CMHSP in reaching an agreement on the allotment and use of funds comprising an individual budget. Accountability for the use of public funds must be a shared responsibility of the CMHSP and the customer.
- 7. Self Direction arrangements are partnerships between the CMHSP and the customer. They require the active commitment of the CMHSP to provide a range of options for customer choice and control of personalized provider relationships within an overall environment of person-centered supports.
- 8. Issues of health, safety and well-being are central to assuring successful accomplishment of a customer's plan of services/supports. These issues must be addressed and resolved using the person-centered planning process. Resolutions should be guided by the customer's preferences and needs, implemented in ways that maintain the greatest opportunity for customer control and direction.
- 9. Self Direction requires recognition that there may be strong inherent conflicts of interest between the customer's choices and current methods of planning, managing, and delivering services/supports. The CMHSP must watch for and seek to minimize or eliminate either potential or actual conflicts of interest between it and its provider systems, and the processes and outcomes sought by the customer.
- 10. Self Direction arrangements must be developed and operated within the requirements of the Pre-Paid Inpatient Health Plan (PIHP) contract between the CMHSP and the State of Michigan. Involvement in self-direction does not change a customer's eligibility for services and supports.
- B. CMHSP compliance with the above stated principles and the following procedures and standards will be monitored per LRE Utilization Management and Compliance Monitoring Policies and Procedures.

#### III. APPLICABILITY AND RESPONSIBILITY

This policy applies to Lakeshore Regional Entity staff and operations, Member CMHSP's and contracted providers.

## IV. MONITORING AND REVIEW

This procedure will be monitored by the Chief Clinical Officer or designee on an annual basis.

### V. DEFINITIONS

<u>Customer</u>: A person with a developmental disability and/or mental illness who receives services from the LRE. Member CMHSPs, or contracted provider. When referenced as making legal commitments and the court has found them not to be competent to make certain decisions, their legal representative would need to support the commitment/decisions.

<u>Fiscal Intermediary (FI)</u>: An independent legal entity that acts as a fiscal agent under contract with LRE or its designated sub-contractor. The purpose of the fiscal intermediary is to receive funds making up a customer's individual budget, and make payments as authorized by the customer to providers and other parties to whom a customer using the individual budget may be obligated. A fiscal intermediary may provide a variety of supportive services that assist the customer in selecting, employing and directing individual and agency providers.

<u>Individual Budget</u>: A fixed allocation of LRE resources (may include other public resources whose access involve the assistance of the CMHSP) denoted in dollar terms. These resources are agreed upon as the necessary cost of services and supports needed to accomplish a customer's plan of services/supports. The customer served uses the funding authorized to acquire, purchase, and pay for services and supports that support accomplishment of the customer's plan.

<u>Person-Centered Planning (PCP)</u>: A process for planning and supporting the customer receiving services that builds upon the customer's capacity to engage in activities that promote community life and honors the customer's preferences, choices, and abilities. The process involves friends, family, and professionals, as the customer desires.

<u>Representative/Designee</u>: A person selected by the customer to act and make decisions on his/her behalf, or a person who is legally designated to sign documents and assist in decision-making. This person could be a parent, guardian, power of attorney or other significant party who advocates for the customer.

<u>Self- Direction (SD)</u>: A philosophy that incorporates a set of concepts and values that underscore a core belief that people who require support from the public mental health system as a result of a disability should be able to define what they need in terms of the life they seek, have the opportunity to control a fixed sum of dollars, have access to meaningful choices, and have control over their lives. Services and supports are not only personcentered, but person-defined and person-controlled. The goal of self-direction is to assist individuals in achieving meaningful lives in the community Self-direction is based on four principles:

- 1. Customers should have the freedom to choose and plan the life they want with the support necessary to that life. This includes the freedom to choose where and with whom one lives, who and how to connect to in one's community, the opportunity to contribute in one's own ways, and the development of a personal lifestyle.
- Customers should have support in arranging both formal and informal resources and personnel necessary for the lives they desire and take steps to reach toward the dream and living his/her desired life in the community, rich in community associations and contributions.
- 3. Customers should have the authority to control allocated resources and finances. Customers will be able to purchase supports in a way that will allow them to get what they need and pay for only what they receive and
- 4. Customers will have the responsibility of accepting a valued role in their community such as through employment or other affiliations, spiritual development and to be

- accountable for using public funds in an efficient, effective and life enhancing manner.
- 5. The customer and his/her support circle have the opportunity to control a fixed sum of dollars, which is derived from the person-centered planning process and called an individual budget. The person controls the use of the resources in his/her individual budget, determining, with the assistance of chosen allies, which services and supports he/she will purchase, from whom, and under what circumstances. Through this process they possess power to make meaningful choices in how they live their life

<u>Support Circle</u>: A group of people that the customer requests to participate in their person-centered planning process. Often includes family members, friends, neighbors, and professionals

### VI. RELATED POLICIES AND PROCEDURES

- A. LRE UM Policies and Procedures
- B. LRE Monitoring Policy

## VII. REFERENCES/LEGAL AUTHORITY

- A. Michigan Medicaid Provider Manual
- B. Medicaid Managed Specialty Supports and Services Contract

## VIII. CHANGE LOG

| Date of Change | Description of Change | Responsible Party      |
|----------------|-----------------------|------------------------|
| 1/1/2014       | New Policy            | Chief Clinical Officer |
| 5/2022         | Annual Update         | Chief Clinical Officer |
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